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Item No. 9

Meeting Date: Wednesday 7th February 2024

**Glasgow City
Integration Joint Board
Finance, Audit and Scrutiny Committee**

Report By: Allison Eccles, Head of Business Development

Contact: Duncan Goldie, Performance Planning Manager

Phone: 0141 287 8751

**HSCP Performance Report Q2/Q3 2023/24
Hosted Services – Sexual Health**

Purpose of Report:

To present a Performance Report for Sexual Health Services hosted by the Glasgow City Integration Joint Board for Quarter 2/3 of 2023/24 for noting.

The Finance Audit and Scrutiny Committee is also being asked to review and discuss performance of other hosted services with the Strategic Lead for Adult Services.

Background/Engagement:

The IJB Finance, Audit and Scrutiny Committee have previously agreed that a Performance Report would be produced and presented to them at each meeting, with specific service areas focused upon and relevant Service Leads in attendance.

Governance Route:

The matters contained within this paper have been previously considered by the following group(s) as part of its development.

- HSCP Senior Management Team
- Council Corporate Management Team
- Health Board Corporate Management Team
- Council Committee
- Update requested by IJB
- Other
- Not Applicable

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Recommendations:	The IJB Finance, Audit and Scrutiny Committee is asked to: a) note the attached performance report for Sexual Health Services hosted by the Glasgow City IJB; and b) review and discuss performance of other Glasgow City IJB hosted services with the Strategic Lead for Adult Services.
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Relevance to Integration Joint Board Strategic Plan:

The report contributes to the ongoing requirement for the Integration Joint Board to provide scrutiny over HSCP operational performance, as outlined within the Strategic Plan.

Implications for Health and Social Care Partnership:

Reference to National Health & Wellbeing Outcome:	HSCP performance activity is mapped against the 9 national health and wellbeing outcomes, ensuring that performance management activity within the Partnership is outcomes focused.
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Personnel:	None.
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Carers:	None.
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Provider Organisations:	None.
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Equalities:	No EQIA has been carried out as this report does not represent a new policy, plan, service or strategy.
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Fairer Scotland Compliance:	N/A
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Financial:	None.
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Legal:	None.
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Economic Impact:	None.
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Sustainability:	None.
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Sustainable Procurement and Article 19:	None.
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Risk Implications:	None.
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Implications for Glasgow City Council:	The Integration Joint Board's performance framework includes social work performance indicators.
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Implications for NHS Greater Glasgow & Clyde:	The Integration Joint Board's performance framework includes health performance indicators.
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1. Purpose

- 1.1 To present a Performance Report for Sexual Health Services hosted by the Glasgow City Integration Joint Board for Quarter 2/3 of 2023/24 for noting. The Finance Audit and Scrutiny Committee is also being asked to review and discuss performance of other hosted services with the Strategic Lead for Adult Services.

2. Background

- 2.1 These reports are one component of the internal scrutiny arrangements which have been put in place across the Health and Social Care Partnership. Other processes have been established to oversee and scrutinise financial and budgetary performance, clinical and care governance, and the data quality improvement regime.

3. Hosted Services

- 3.1 "Hosted Services" are those services which are managed and delivered by a single Integration Joint Board on behalf of two or more integration authorities within the NHS Greater Glasgow and Clyde area. The list below shows the Hosted Services which Glasgow City HSCP provides to other HSCPs within NHS Greater Glasgow and Clyde.

Specialist Mental Health Services

MHAU (Mental Health Assessment Unit)

Esteem

Eating Disorder

Perinatal

Adult Mental Health Liaison

Addiction Acute Liaison

Violence Reduction Service

Addiction In Patients

Sexual Health

Archway

Police Custody and Prison Healthcare Services

Continence

- 3.2 Sexual Health performance is regularly reported to the Finance, Audit and Scrutiny Committee within the quarterly performance reports. Quarter 2 data for all services was presented to Committee on [13th December 2023](#); the full Quarter 3 report will be made available in April. An interim report focussing on Sexual Health Services covering part of Quarter 3 is attached to support the presentation and discussion on hosted services.

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3.3 Performance of the other hosted services referred to above will be discussed by the Strategic Lead for Adult Services within their presentation.

4. Summary

4.1 There is a summary table at the start of the attached report which notes the numbers of indicators which were RED/AMBER/GREEN/GREY over the last two reporting periods for Sexual Health indicators.

4.2 The attached report provides details of performance for Sexual Health Services at city and locality levels, including trends over time. Narrative is provided for those indicators which are marked as RED or AMBER, which describes the actions being taken to improve performance and the timescales for improvement.

5. Recommendations

5.1 The IJB Finance, Audit and Scrutiny Committee is asked to:

- a) note the attached performance report for Sexual Health Services hosted by the Glasgow City IJB; and
- b) review and discuss performance of other Glasgow City IJB hosted services with the Strategic Lead for Adult Services.

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CORPORATE PERFORMANCE REPORT

**QUARTER 2/3
2023/24**

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CONTENTS

SECTION	PAGE NUMBER
1. Performance Summary	7
2. Sexual Health Services	9
Appendix 1 – HSCP Corporate Priorities	15
Appendix 2 – National Health & Wellbeing Outcomes	16

1. PERFORMANCE SUMMARY









1. Key to the Report

Outlined below is a key to the classifications used in this report.

Classification		Key to Performance Status	Direction of Travel - Relates to change between the last two quarters or last two reporting periods for which information is available	
	RED	Performance misses target by 5% or more	▲	Improving
	AMBER	Performance misses target by between 2.5% and 4.99%	▶	Maintaining
	GREEN	Performance is within 2.49% of target	▼	Worsening
	GREY	No current target and/or performance information to classify performance against.	N/A	This is shown when no comparable data is available to make trend comparisons

2. Summary

The table below compares the overall RAG rating for Sandyford Sexual Health Services between the 2 most recent quarters, or where the data is not reported quarterly, the last two reporting periods for which information is available.

CARE GROUPS/AREAS	Previous Period RAG Rating				This Period RAG Rating			
								
Sexual Health Services	4 (50%)		4 (50%)		2 (25.0%)	1 (12.5%)	5 (62.5%)	

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SEXUAL HEALTH SERVICES

Indicator	1. Number of vLARC IUD appointments offered across all Sandyford locations
Purpose	To establish if clinical capacity is being maximised.
National/ Corporate/ Local	Local HSCP indicator
Health & Wellbeing Outcome	Outcome 1 (See Appendix 2)
Strategic Priority	Priority 1 (See Appendix 3)
HSCP Leads	Jackie Kerr, Assistant Chief Officer (Adult Services) Rhoda Macleod, Head of Adult Services (Sexual Health)

Locality	Target	2021/22		2022/23				2023/24		
		Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Oct/Nov
City		877	1115	921	1019	1191	1202	1110	1189	830
NE		284	323	249	362	326	294	210	182	132
NW		593	792	582	651	706	758	750	817	598
S		0	0	90	96	159	150	150	190	100
NHSGGC	1354 per Quarter	1169 (R)	1465 (R)	1164 (R)	1427 (G)	1527 (G)	1509 (G)	1393 (G)	1471 (G)	971 (G)
DNA rate (%)		6	4	6	9.9	9.61	8.21	11.25	11.09	8.95

Performance Trend
Pro-rata target for the period Oct/Nov is 907, so performance continuing to meet the target and is GREEN. Please note that the DNA rate does not include TOP.
Please also note that the quarterly targets were adjusted from 1888 to 1354 for 2022/23.
Back to Summary

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Indicator	2. Number of vLARC Implant appointments offered across all Sandyford locations
Purpose	To establish if clinical capacity is being maximised.
National/ Corporate/ Local	Local HSCP indicator
Health & Wellbeing Outcome	Outcome 1 (See Appendix 2)
Strategic Priority	Priority 1 (See Appendix 3)
HSCP Leads	Jackie Kerr, Assistant Chief Officer (Adult Services) Rhoda Macleod, Head of Adult Services (Sexual Health)

Locality	Target	2021/22		2022/23				2023/24		
		Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Oct/Nov
City		745	1003	1128	1629	1611	1169	1069	1168	736
NE		311	414	383	413	279	323	253	200	135
NW		434	589	625	1044	1167	667	552	650	407
S		0	0	120	172	165	179	264	318	194
NHSGGC	1166 per quarter	1217 (R)	1626 (R)	1587 (G)	2035 (G)	2210 (G)	1776 (G)	1859 (G)	2090 (G)	1470 (G)
DNA rate		11%	11%	10%	13%	18.75%	15.54%	19.47%	18.92%	18.19%

Performance Trend
Pro-rata target for the period Oct/Nov is 781, so performance continuing to meet the target and is GREEN. Please note that the DNA rate does not include TOP.
Please also note that the quarterly targets were adjusted from 2431 to 1166 for 2022/23.
Back to Summary

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Indicator	3. Median waiting times for access to Urgent Care appointments.
Purpose	To monitor waiting times for access to first appointment at Urgent Care services across all Sandyford locations. This indicator now uses median rather than mean (average) as small numbers of outliers were adversely skewing the results.
Type of Indicator	National Indicator
Health & Wellbeing Outcome	Outcome 1 (See Appendix 2)
Strategic Priority	Priority 1 (See Appendix 3)
HSCP Leads	Jackie Kerr, Assistant Chief Officer (Adult Services) Rhoda Macleod, Head of Adult Services (Sexual Health)

Locality	Target	2021/22		2022/23				2023/24		
		Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Oct/Nov
City	2 working days	1 (G)	1 (G)	1 (G)	2 (G)	2 (G)	1 (G)	1 (G)	1 (G)	1 (G)
NE		1 (G)	1 (G)	2 (G)	2 (G)	2 (G)	1 (G)	1 (G)	1 (G)	1 (G)
NW		1 (G)	2 (G)	1 (G)	2 (G)	2 (G)	1 (G)	1 (G)	1 (G)	1 (G)
S		NA	NA	2 (G)	2 (G)	2 (G)	1 (G)	1 (G)	1 (G)	1 (G)
NHSGGC		1	2	2	2	2	1	1	1	1

Performance Trend
<p>Performance remains GREEN in all localities and city and Board wide. Target was adjusted to be based on median rather than average waiting times as small numbers of outliers were distorting the figures.</p> <p>Back to Summary</p>

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Indicator	4-7. Number of individual young people attending all Sandyford services aged 13-15 and 16-17 (Male & Female)
Purpose	Improved service access across all Sandyford services for young people aged under 18
National/Corporate/Local	Local HSCP indicator
Health & Wellbeing Outcome	Outcome 1(See Appendix 2)
Strategic Priority	Priority 1 (See Appendix 3)
HSCP Leads	Jackie Kerr, Assistant Chief Officer (Adult Services) Rhoda Macleod, Head of Adult Services (Sexual Health)

Male

Area	Age	Target	2021/22		2022/23				2023/24		
			Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Oct/Nov
City	13-15	4	4 (G)	6 (G)	4 (G)	5 (G)	3 (R)	4 (G)	7 (G)	8 (G)	4 (G)
NHSGGC		13	11 (R)	9 (R)	14 (G)	15 (G)	13 (G)	13 (G)	14 (G)	13 (G)	13 (G)
City	16-17	27	18 (R)	14 (R)	20 (R)	20 (R)	23 (R)	20 (R)	23 (R)	17 (R)	14 (R)
NHSGGC		49	34 (R)	28 (R)	21 (R)	39 (R)	43 (R)	39 (R)	40 (R)	36 (R)	26 (R)

Female

Area	Age	Target	2021/22		2022/23				2023/24		
			Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Oct/Nov
City	13-15	75	51 (R)	46 (R)	44 (R)	53 (R)	70 (R)	59 (R)	71 (R)	78 (G)	48 (A)
NHSGGC		143	109 (R)	107 (R)	104 (R)	113 (R)	127 (R)	122 (R)	143 (G)	128 (R)	91 (A)
City	16-17	195	143 (R)	146 (R)	127 (R)	178 (R)	165 (R)	147 (R)	150 (R)	173 (R)	114 (R)
NHSGGC		358	266 (R)	278 (R)	241 (R)	324 (R)	320 (R)	296 (R)	297 (R)	324 (R)	239 (G)

Performance Trend

Performance varies between age groups and over time.

During Oct/Nov, pro-rata targets were met and GREEN for younger age males (13-15) (City and NHSGGC). Younger aged females (13-15) were AMBER (City and NHSGGC).

Older males (16-17) were RED (City and NHSGGC), while older females (16-17) were RED in the City and GREEN for NHSGGC.

Issues Affecting Performance

Decreasing numbers of young people attending sexual health services is not just an issue local to GGC. Nationally, the numbers of young people attending sexual health services are declining and have been for some years. Local Health and Wellbeing surveys tend to suggest that young people are not as sexually active and/or are delaying sex until they are older.

Walk in clinics have been trialled in both Parkhead and Paisley, and impact of attendance is being monitored. To date this has not shown any significant improvement.

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Actions to Improve Performance

Digital promotion campaign to raise awareness has concluded, and the impact of this may be seen next quarter.

Improved promotion of sexual health issues and clinics through social media, schools. This includes cultivating relationships with organisations that young people are more likely to follow on social media in order to promote services through them.

Consideration may be given to piloting a service for young people aged up to 21, as the high risk may have shifted to this age group (with young people deferring sex until older, etc).

Timescales for Improvement

Throughout 2024.

[Back to Summary](#)

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Indicator	8. Waiting times for access to first TOPAR (Termination of Pregnancy and Referral) Appointments
Purpose	To monitor waiting times for access to first appointment at TOPAR service
National/ Corporate/ Local	Local HSCP indicator
Health & Wellbeing Outcome	Outcome 1 (See Appendix 2)
Strategic Priority	Priority 1 (See Appendix 3)
HSCP Leads	Jackie Kerr, Assistant Chief Officer (Adult Services) Rhoda Macleod, Head of Adult Services (Sexual Health)

Target	2021/22		2022/23				2023/24		
	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Oct/Nov
5 working days	1 (G)	2 (G)	3 (G)	4 (G)	4 (G)	6 (R)	7 (R)	6 (R)	4 (G)

Performance Trend
Performance moved from RED to GREEN over the period since September.
Back to Summary

APPENDIX 1 - HEALTH & SOCIAL CARE PARTNERSHIP CORPORATE PRIORITIES

- Priority 1 Prevention, early intervention, and well-being
- Priority 2 Supporting greater self-determination and informed choice
- Priority 3 Supporting people in their communities
- Priority 4 Strengthening communities to reduce harm
- Priority 5 A healthy, valued and supported workplace
- Priority 6 Building a sustainable future

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APPENDIX 2 - NATIONAL HEALTH AND WELLBEING OUTCOMES

Outcome 1	People are able to look after and improve their own health and wellbeing and live in good health for longer
Outcome 2	People, including those with disabilities or long term conditions, or who are frail, are able to live, as far as reasonably practicable, independently and at home or in a homely setting in their community
Outcome 3	People who use health and social care services have positive experiences of those services, and have their dignity respected
Outcome 4	Health and social care services are centred on helping to maintain or improve the quality of life of people who use those services
Outcome 5	Health and social care services contribute to reducing health inequalities
Outcome 6	People who provide unpaid care are supported to look after their own health and wellbeing, including to reduce any negative impact of their caring role on their own health and well-being
Outcome 7	People using health and social care services are safe from harm
Outcome 8	People who work in health and social care services feel engaged with the work they do and are supported to continuously improve the information, support, care and treatment they provide
Outcome 9	Resources are used effectively and efficiently in the provision of health and social care services